

UNITED STATES DISTRICT COURT

for the

Middle District of Tennessee

William S. Yancey, Individually and on behalf of all
others similarly situated

Plaintiff

v.

Remington Arms Company, LLC, Cascade
Cartridge, Inc. a/k/a CCI Ammunition

Defendant

Civil Action No. **1 - 1 1 0 1 0 8**

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* Cascade Cartridge, Inc., a/k/a CCI Ammunition
2299 Snake River Avenue
Lewiston, ID 83501

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: Roger W. Dickson, James A. Beakes, III, Miller & Martin PLLC,
Suite 1200, 150 Fourth Avenue North, Nashville TN 37219
615-244-9270

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

KEITH THROCKMORTON

CLERK OF COURT

Althea Straughter
Signature of Clerk or Deputy Clerk

Date: **DEC 19 2011**

RETURN COPY

Civil Action No. _____

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

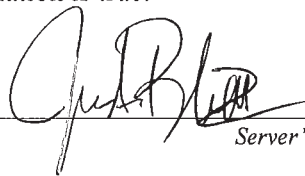
☐ I returned the summons unexecuted because _____; or

☒ Other *(specify)*: Certified Mail/Return Receipt (see below)

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____ 0.00.

I declare under penalty of perjury that this information is true.

Date: 02/14/2012



Server's signature

James A. Beakes III (attorney for William S. Yancey)

Printed name and title

Miller & Martin PLLC
150 4th Avenue North, Suite 1200
Nashville, TN 37219

Server's address

Additional information regarding attempted service, etc:

(SEE ATTACHED CERTIFIED MAIL RETURN RECEIPT ON FOLLOWING PAGE)

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input checked="" type="checkbox"/> <i>[Signature]</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Cascade Cartridge, Inc. aka CCI Ammunition 2299 Snake River Avenue Lewisbn, Idaho 83501</p>		<p>B. Received by (Printed Name) <i>Harv Infante</i></p> <p>C. Date of Delivery <i>1.10.12</i></p>	
		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>7011 1150 0000 3998 4209</p>	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	